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Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1) 7590 06/17/2004 021323 Certificate of Mailing or Transmission TESTA, HURWITZ & THIBEAULT, LLP I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below. HIGH STREET TOWER 125 HIGH STREET BOSTON, MA 02110 (Depositor's name) (Signature) (Date) CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 8435 PTK-194 03/30/2001 John Gary Sousa 09/822.045 TITLE OF INVENTION: MODE-LIMITING DIODE LASER STRUCTURE DATE DUE **PUBLICATION FEE** TOTAL FEE(S) DUE ISSUE FEE APPLN. TYPE SMALL ENTITY 09/17/2004 \$1630 \$300 NO \$1330 nonprovisional CLASS-SUBCLASS ART UNIT **EXAMINER** 372-045000 2828 JACKSON, CORNELIUS H 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list (1) the Testa, Hurwitz & Thibeault, LLP names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single $\hfill \Box$ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. attorneys or agents. If no name is listed, no name will be printed. 3. 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Publication Fee ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number ______ (enclose an extra copy of this form). □ Advance Order - # of Copies _ Deposit Account Number Director for Patents is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. (Authorized Signature) (Date) Steven J. Frank September 15, NOTE; The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. 09/17/2004 RMEBRAH1 00000168 09822045 1330.00 OP This collection of information is required by 37 CFR 1.311. The information is required to Inis collection of information is required by 37 CFR 1.311. 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SP 1 5 2004 TRANSMITTAL FORM			Application Serial Number		09/822,045	
			Filing Date		March 30, 2001	
			First Named Inventor		Sousa et al.	
			Group Art Unit		2828	
			Examiner Name		Cornelius H. Jackson	
			Attorney Docket No.		PTK-194	
			Patent No.		Not applicable	
			Issue Date		Not applicable	
ENCLOSURES (check all that apply)						
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	Amendment/Response Preliminary		Request For C Examination (I Transmittal			Status Inquiry
	After Final	_			\boxtimes	Return Receipt Postcard
	Affidavits/declaration(s) Letter to Official Draftsperson	Power of Attor		ney Prior Powers)		Certificate of First Class Mailing under 37 C.F.R. 1.8
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	Sequence Listing submission Paper Copy/CD Computer Readable Copy Statement verifying identity of above					
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Direct all correspondence to: Patent Administrator Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100			Respectfully submitted, Date: September 15, 2004 Reg. No. 33,497 Tel. No.: (617) 310-8108 Fax No.: (617) 248-7100 Testa, Hurwitz & Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110			